

BEST AVAILABLE COPY

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|---|--|
| DATE: <u>2/23/07</u> | FROM: <u>T. Voe Hz</u> (print name) |
| FORWARD TO: A. Art Unit: <u>2744</u> B. Class: <u>455 or 379</u> C Subclass: _____ | REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s): <input type="checkbox"/> (check box) <input type="checkbox"/> (check box) <input type="checkbox"/> (check box) |

FURTHER EXPLANATION IF NEEDED:

Telephone Billing

| | |
|---|--|
| DATE: _____ | FROM: _____ (print name) |
| FORWARD TO: A. Art Unit: _____ B. Class: _____ C Subclass: _____ | REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s): <input type="checkbox"/> (check box) <input type="checkbox"/> (check box) <input type="checkbox"/> (check box) |

FURTHER EXPLANATION IF NEEDED:

| | |
|--|--|
| DATE: _____ | FROM: _____ (print name) |
| FORWARD TO CLASSIFIER  | REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s): <input type="checkbox"/> (check box) <input type="checkbox"/> (check box) <input type="checkbox"/> (check box) |

FURTHER EXPLANATION IF NEEDED:

| | |
|---|--|
| DISPOSITION BY 2700 CLASSIFICATION | |
| DATE: _____ | CLASSIFIER: _____ |
| FORWARD TO: A. Art Unit: _____ B. Class: _____ C Subclass: _____ | REASON(S): A. You had Parent B. See Title C. See Abstract D. See Claim(s): <input type="checkbox"/> (check box) <input type="checkbox"/> (check box) <input type="checkbox"/> (check box) |

FURTHER EXPLANATION IF NEEDED: